

Affirmative Action Quarterly Report

Quarter:
1st _____ 2nd _____ 3rd _____ 4th _____

Fiscal Year:

Agency:

Contact:

(1) List contacts made this quarter for Protected Class Recruitment *(Please exclude the disabled)*.

(2) List staff training and development provided for this quarter for career development & promotion.

(3) List any AA/EEO training provided this quarter to staff.

(4) List your Affirmative Action Activities for this quarter (such as Agency presentations, meetings relating to AA/EEO, Director's Activities, training received, technical assistance provided).

(5) List Affirmative Action Plan Objectives completed this quarter.

(6) Summary of complaints handled this quarter (Under "Category," indicate if the complaint was based on gender, protected age, religion, color, disability, marital status, or national origin).

Category	Internal/External	Issue	Status

(7) List any Minority Business Enterprises/Disadvantaged Business Enterprise/Women Business Enterprise contract awarded during this quarter. Include the % dollar amounts as they compare to the total dollar amount awarded.

(8) Describe activities engaged in during this quarter that involves the recruitment, hiring, and/or promotion of persons with a disability.

Name of Person completing form:

Date: